Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10624531

(Column 1)					l (Colui	mn 2\	SMALL E	<b>O</b> D	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			(Scharmer)		(Goldini Z)		RATE	FEE	OR <sub>.</sub>	RATE	FEE
FOR			NUMBER FILED		NUMB	ED EVIDA	BASIC FEE			BASIC FEE	750.00
					NUMBER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			58 _ minus 20=		<u>*38</u>		X\$ 9=	342,00	OR	X\$18=	
INDEPENDENT CLAIMS			6 _ minus 3 =		3		X42=	12611	ЮR	X84=	
MULTIPLE DEPENDENT CLAIM P			RESENT				+140=	<i>1.03,000</i>	OR	+280=	
* If	the difference	in column 1 is	less than ze	ro, enter	"0" in column 2		TOTAL	843:0	∌0R	TOTAL	
	C	LAIMS AS A	MENDED	ENDED - PART II						OTHER	THAN
(Column 1)				(Colum HIGHE		(Column 3)	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	E OL AINA	=	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	JUITPLE DEF	ENDEN	CLAIM		+140=	4	OR	+280=	
										TOTAL	
	(Column 1) (Column 2) (Column 3)								١٠٠٠	ADDIT. FEE	
В		CLAIMS		HIGH	IEST			ADDI-			ADDI-
AMENDMENT		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
\ME	Independent	*	Minus	***		=	X42=	,	OR	X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	ENDENT	CLAIM				OIT		<u> </u>
							+140=		OR	+280=	
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colur		(Column 3)					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* -	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X42=			X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT		Γ CLAIM		7,17	`	OR	,,,,,	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+140=	,	OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
		mber Previously P nber Previously Pa						propriate box			